Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Elicotive datualy 1, 2000									1000	$\varphi \varphi$	70	
		CLAIMS AS	S FILED - (Column		(Column 2)		SMA		YTITY	OR	OTHER SMALL	
TOTAL CLAIMS							R/	TE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			∂8 minus 20=		* 8		X	9=		OR	X\$18=	144
INDEPENDENT CLAIMS			4 minus 3 =		*		X	12=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							+1	40=		OR	+280=	<u> </u>
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2	TO	TAL		OR	TOTAL	978. vo
CLAIMS AS AMEN (Column 1)				ENDED - PART II (Column 2) (Column 3)			SM	SMALL ENTITY			OTHER SMALL	THAN
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	2=		OR	X84=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	T CLAIM		+1	40=		OR	+280=	
								OTAL FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,		<u> </u>	•	_	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** ,		=	XS	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	2=		OR	X84=	
尸	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	T CLAIM		+1	40=		OR	+280=	•
								OTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)										-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
WEI	Independent	*	Minus	***		<u> </u>	X.	12=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						1	40	1	1		
+140= + If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	ine manestikur	IIDEL FIEVIOUSIV P	מוטירטז נוסנפו כ	, macheu	ווו פו עוויסטו	CHIGHOST HUMBS			, ,			